

09/09/11

Application # 34888

Harnett County Central Permitting  
PO Box 65 Lillington NC 27546  
910 893 7525 Fax 910 893 2793 www.harnett.org/permits

Each section below to be filled out  
by whomever performing work  
Must be owner or licensed  
contractor Address company  
name & phone must match

**Application for Residential Building and Trades Permit**

Owner's Name McKee Homes, LLC Date 10/13/14  
Site Address 197 Bunting Drive Phone 910-475-7100 x.723  
Directions to job site from Lillington \_\_\_\_\_

Subdivision Oakmont Lot 131  
Description of Proposed Work Single Family Residential # of Bedrooms \_\_\_\_\_  
Heated SF 363 Unheated SF 469 Finished Bonus Room? \_\_\_\_\_ Crawl Space \_\_\_\_\_ Slab

*Cancelled  
12.1.14*

**General Contractor Information**

GML Development Inc  
Building Contractor's Company Name  
101 Hay Street, Fayetteville NC 28301  
Address  
63970  
License # \_\_\_\_\_

(910) 475-7100 ext 723  
Telephone  
jbuckwalter@mckeehomesnc.com  
Email Address

**Electrical Contractor Information**

Description of Work Single Family Residential Service Size 200 Amps T-Pole  Yes  No  
Sandy Ridge Electric  
Electrical Contractor's Company Name  
454 Whitehead Rd, Fayetteville, NC 28312  
Address  
100064  
License # \_\_\_\_\_

(910) 323-2458  
Telephone  
keith@sandyridgeelectric.com  
Email Address

**Mechanical/HVAC Contractor Information**

Description of Work Single Family Residential  
Certified Heating & A/C  
Mechanical Contractor's Company Name  
PO Box 1071, Hope Mills, NC 28348  
Address  
20012 H3-1  
License # \_\_\_\_\_

(910) 858-0000  
Telephone  
certifiedheatair@embarqmail.com  
Email Address

**Plumbing Contractor Information**

Description of Work Single Family Residential # Baths \_\_\_\_\_  
Dell Haire Plumbing Telephone  
Plumbing Contractor's Company Name (910) 818-4863  
7612 Documentary Drive, Fayetteville, NC 28306  
Address  
24204 PL  
License # \_\_\_\_\_

dellhaireplumbing@hotmail.com  
Email Address

**Insulation Contractor Information**

Cumberland Insulation  
Insulation Contractor's Company Name & Address

(910) 484-7118  
Telephone

\*NOTE General Contractor must fill out and sign the second page of this application

I hereby certify that I have the authority to make necessary application that the application is correct and that the construction will conform to the regulations in the Building Electrical Plumbing and Mechanical codes and the Harnett County Zoning Ordinance I state the information on the above contractors is correct as known to me and that by signing below I have obtained all subcontractors permission to obtain these permits and if any changes occur including listed contractors site plan number of bedrooms building and trade plans Environmental Health permit changes or proposed use changes I certify it is my responsibility to notify the Harnett County Central Permitting Department of any and all changes  
**EXPIRED PERMIT FEES - 6 Months to 2 years permit re-issue fee is \$150 00 After 2 years re-issue fee is as per current fee schedule**

\_\_\_\_\_  
Signature of Owner/Contractor/Officer(s) of Corporation

\_\_\_\_\_  
Date

### Affidavit for Worker's Compensation N C G S 87-14

The undersigned applicant being the

General Contractor     Owner     Officer/Agent of the Contractor or Owner

Do hereby confirm under penalties of perjury that the person(s) firm(s) or corporation(s) performing the work set forth in the permit

Has three (3) or more employees and has obtained workers compensation insurance to cover them

Has one (1) or more subcontractors(s) and has obtained workers compensation insurance to cover them

Has one (1) or more subcontractors(s) who has their own policy of workers compensation insurance covering themselves

Has no more than two (2) employees and no subcontractors

While working on the project for which this permit is sought it is understood that the Central Permitting Department issuing the permit may require certificates of coverage of worker's compensation insurance prior to issuance of the permit and at any time during the permitted work from any person firm or corporation carrying out the work

Company or Name McKee Homes, LLC

Sign w/Title \_\_\_\_\_ Date \_\_\_\_\_



10/23/14

To Whom it may Concern,

Oakmont Development Partners, LLC hereby gives McKee Homes, LLC the right to begin applying for permits & beginning construction of lot 131 in Oakmont before the lots are purchased.

Sincerely,

A handwritten signature in black ink, appearing to read "Patrick McKee".

Patrick McKee  
Managing Member  
5112 Pine Birch Dr  
Raleigh, NC 27606  
919-793-5237

Filed on: 10/13/2014  
Initially filed by: jbwaltwalter

# Details: Appointment of Lien Agent

Entry #: 202149

## Designated Lien Agent

First American Title Insurance Company  
Online: [www.liensnc.com](http://www.liensnc.com) (<http://www.liensnc.com>)  
Address: 19 W Hargett St., Suite 507 / Raleigh, NC 27601  
Phone: 888-690-7384  
Fax: 913-489-5231  
Email: [support@liensnc.com](mailto:support@liensnc.com) (<mailto:support@liensnc.com>)

## Project Property

Lot 131 Oakmont  
197 Bunting Drive  
Lillington, NC 27546  
Harnett County

## Property Type

1-2 Family Dwelling

## Print & Post



**Contractors:**  
Please post this notice on the Job Site.  
**Suppliers and Subcontractors:**  
Scan this image with your smart phone to view this filing. You can then file a Notice to Lien Agent for this project.

## Owner Information

McKee Homes LLC  
101 Hay Street  
Fayetteville, NC 28301  
United States  
Email: [jbwaltwalter@mckeehomesnc.com](mailto:jbwaltwalter@mckeehomesnc.com)  
Phone: 910-475-7100

## Date of First Furnishing

11/14/2014

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Technical Support Hotline: (888) 690-7384